



**Alternative Fuel Use Permit  
Application and Decal Order Form**

DR-248  
R. 08/03

Account Number

For Period Ending

FEI Number or Social Security Number

Enter name and mailing address, if not pre-printed

**Computation of Decal Fee(s)**

County Code	Class A Fee			Class B Fee			Class C Fee		
	Rate (x)	Number of Vehicles	(=) Total Due	Rate (x)	Number of Vehicles	(=) Total Due	Rate (x)	Number of Vehicles	(=) Total Due
<b>Class Totals</b>			\$			\$			\$

Print or Type Applicant's Name \_\_\_\_\_

Total Decals Ordered \_\_\_\_\_

Title \_\_\_\_\_ Contact Phone Number \_\_\_\_\_

Total Fees Due \$ \_\_\_\_\_

I certify that this application has been examined by me and to the best of my knowledge and belief is true and complete.

Signature of Applicant \_\_\_\_\_

\*\*\* Do Not Detach Coupon \*\*\*



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Total Decals Ordered \_\_\_\_\_

Total Fees Due \$ \_\_\_\_\_

## **How to Complete the Alternative Fuel Use Permit—Application and Decal Order Form**

To compute the fees required for the purchase of Alternative Fuel Use Permits (Decals), refer to the fee schedule on the enclosed cover letter.

1. Determine the county of your fueling facility. (Those persons who do not operate their own fueling facilities should determine the county where each vehicle(s) is predominately used and fueled.)
2. Determine the class code of each vehicle as defined in the GENERAL INFORMATION section on the enclosed cover letter.
3. Enter the county, county number, number of vehicles and rate in each class code.
4. Multiply the number of vehicles by the corresponding rate and enter total. (STATE FEES AND LOCAL OPTION FEES HAVE BEEN COMBINED.)
5. Add the number of vehicles and the fees for each class and indicate the totals in the bottom row, labeled: Class Totals.
6. Determine the Total Decals Ordered by adding the number of vehicles in Class Totals row. Total vehicles of Class A,B,C, must agree with total decals ordered.
7. Determine the Total Fees Due by adding the dollar amounts in Class Totals row.
8. Indicate the Total Fees Due on the line provided on the application.
9. Complete and sign the application.
10. Your check, made payable to the Florida Department of Revenue, should be submitted with this application to the following address:

FLORIDA DEPARTMENT OF REVENUE  
CENTRAL REGISTRATION FUEL UNIT  
PO BOX 6480  
TALLAHASSEE FL 32314-6480

### **Proration of Alternative Fuel Use Fees**

Section 206.877(2), Florida Statutes, states that a motor vehicle owner who applies for the decal after March 31, June 30, or September 30 of any year shall pay three-fourths, one-half or one-fourth of the fee, respectively. If you require additional decals during the year, your fee and eligibility for prorated decals will be based on the postmark date of your application.

If you have any questions or require assistance, please contact the Central Registration Fuel Unit at (850) 488-4772.